PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correct maintenance fee notifica	ed below or directed ot	ng the l herwise	Patent, advance in Block 1, by	orders and no (a) specifying	otification of r	naintenance fees w pondence address;	/ill be n and/or	nailed to the current of (b) indicating a separ	correspondence address as ate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 57246 7590 12/31/2009						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
c/o CPA Global P.O. Box 52050	HES BELLERMA		LLP		I he Stat addi tran	Cer reby certify that th es Postal Service w ressed to the Mail smitted to the USP	tificate is Fee(s vith suff Stop 1 TO (571	of Mailing or Transn) Transmittal is being icient postage for first SSUE FEE address a) 273-2885, on the da	nission deposited with the United class mail in an envelope above, or being facsimile te indicated below.	
Minneapolis, M	L		Shellie Bailey			(Depositor's name)				
					/-	Shellie Ba:	iley/	<u>'</u>	(Signature)	
					M	arch 30, 20	010		(Date)	
APPLICATION NO.	APPLICATION NO. FILING DATE		FIRST NAMED INVEN			TOR ATTORNEY DOCKET NO.			CONFIRMATION NO.	
10/076,367	10/076,367 02/19/2002		Dennis S. Lee			0063-070001			1505	
TITLE OF INVENTION				_						
APPLN. TYPE			SUE FEE DUE			PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	visional NO		\$1510		300	\$0		\$1810	03/31/2010	
EXAMINER			ART UNIT	CLASS-S	SUBCLASS]				
MILLS, DONALD L			2462 370-235000							
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47, Rev 03-02 or more recent) attached. Use of a Custome Number is required.				(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
(A) NAME OF ASSI BROADCOM CO	less an assignee is iden h in 37 CFR 3.11. Com GNEE DRPORATION	tified be pletion	elow, no assigned of this form is NO	e data will ap DT a substitut (B) RESID IRVINE,	opear on the pure for filing an DENCE: (CITY	atent. If an assignassignment. 'and STATE OR C	OUNTI	RY)	cument has been filed for	
Please check the appropr	tate assignee category o	r catego								
4a. The following fee(s) Issue Fee Publication Fee (N Advance Order -	No small entity discount		A check	 a. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge overpayment, to Deposit Account Number _ 50-3521 _ (enclose an extra copy of this form). 						
	s SMALL ENTITY stat	us. See	37 CFR 1.27.					1TY status. See 37 CF		
interest as shown by the	records of the United St	ates Pate	ent and Trademar	k Office.					assignee or other party in	
	/Justin B. S			No. 54,	431/ -			ch 30, 2010		
Typed or printed name					_	Registration N				
This collection of inform an application. Confiden submitting the complete	nation is required by 37 tiality is governed by 35 d application form to the	CFR 1.3 5 U.S.C. e USPT	11. The informat 122 and 37 CFF O. Time will var	ion is required R 1.14. This conding	d to obtain or r ollection is est upon the indiv	etain a benefit by the imated to take 12 re idual case. Any co	he publi ninutes mments	c which is to file (and to complete, including on the amount of tim	by the USPTO to process) gathering, preparing, and e you require to complete	

subminuting the comparted application form to the Cost 10. This will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing his burden, should be sent to the Chief Information Officer, U.S. Deart and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22131-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22131-31450. Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.